County: Trempeal eau ARCADIA NURSING HOME 464 SOUTH ST JOSEPH AVENUE ARCADIA 54612 Phone: (608) 323-3341
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? Yes
Number of Beds Set Up and Staffed (12/31/00): 75
Total Licensed Bed Capacity (12/31/00): 75
Number of Residents on 12/31/00: 74 Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? Non-Profit Church Related Skilled No Yes Average Daily Census: 72

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Services Provided to Non-Residents	Į	Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%			
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	%   	Age Groups	%	Less Than 1 Year 1 - 4 Years	23. 0 47. 3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.4	More Than 4 Years	29. 7
Day Servi ces	No	Mental Illness (Org./Psy)	23. 0	<b>65</b> - <b>74</b>	2. 7		
Respite Care	No	Mental Illness (Other)	9. 5	<b>75 - 84</b>	31. 1		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	54. 1	****************	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & 0ver	10. 8	Full-Time Equivaler	nt
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Re	esi dents
Home Delivered Meals	No	Fractures	0.0		100. 0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	27. 0	65 & 0ver	98. 6	[	
Transportation Transportation	No	Cerebrovascul ar	13. 5			RNs	4. 1
Referral Service	Yes	Di abetes	6. 8	Sex	%	LPNs	13. 1
Other Services	Yes	Respi ratory	1.4			Nursing Assistants	
Provi de Day Programming for	İ	Other Medical Conditions	18. 9	Male	29. 7	Aides & Orderlies	29. 5
Mentally Ill	No			Female	70. 3		
Provi de Day Programming for			100. 0				
Developmentally Disabled	No				100. 0		
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## Method of Reimbursement

		Medica (Title		(	Medic Title			0th	er	P	ri vate	Pay	 I	Manage	d Care		Percent
			Per Die	m		Per Die	m		Per Die	m		Per Dien	1	Ŭ ]	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	3	4. 8	\$111.00	0	0. 0	\$0.00	1	8. 3	\$133.00	0	0. 0	\$0.00	4	5. 4%
Skilled Care	0	0. 0	\$0.00	48	77.4	\$94. 56	0	0. 0	\$0.00	11	91.7	\$118.50	0	0. 0	\$0.00	59	79. 7%
Intermedi ate				11	17.7	\$78. 11	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	11	14. 9%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In		0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0. 0		62 1	100.0		0	0.0		12	100.0		0	0. 0		74	100.0%

ARCADÍA NURSING HOME

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution	of Residents'	Condi ti d	ons, Services	, and Activities as of 1	12/31/00
beachs builting kepoliting lellou		]		%	Needi ng		Total
Percent Admissions from:		Activities of	%		stance of	% Totally	Number of
Private Home/No Home Health	10.0	Daily Living (ADL)	Independent	One (	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	13. 3	Bathi ng	0.0		<b>59</b> . <b>5</b>	40. 5	74
Other Nursing Homes	6. 7	Dressi ng	21.6		70. 3	8. 1	74
Acute Care Hospitals	40. 0	Transferring	40. 5		<b>50.</b> 0	9. 5	74
Psych. HospMR/DD Facilities	0. 0	Toilet Use	32. 4		47. 3	20. 3	74
Rehabilitation Hospitals	0. 0	Eati ng	85. 1		8. 1	6. 8	74
Other Locations	30.0	* * * * * * * * * * * * * * * * * * *	******	******	******	*********	********
Total Number of Admissions	30	Continence	1 0 .1 .	%	Special Trea		%
Percent Discharges To:		Indwelling Or Externa		8. 1		Respiratory Care	12. 2
Private Home/No Home Health	3. 3	Occ/Freq. Incontinent		48. 6		Tracheostomy Care	0. 0
Private Home/With Home Health	20. 0	Occ/Freq. Incontinent	of Bowel	16. 2	Recei vi ng		0. 0
Other Nursing Homes	3. 3	_				Ostomy Care	2. 7
Acute Care Hospitals	3. 3	Mobility				Tube Feeding	0. 0
Psych. HospMR/DD Facilities	6. 7	Physically Restrained		2. 7	Recei vi ng	Mechanically Altered Die	ets 23.0
Reĥabilitation Hospitals	0. 0				_	-	
Other Locations	3. 3	Skin Care			Other Reside	nt Characteristics	
Deaths	60. 0	With Pressure Sores		2. 7	Have Advan	ce Directives	86. 5
Total Number of Discharges		With Rashes		2. 7	Medi cati ons		
(Including Deaths)	30				Recei vi ng	Psychoactive Drugs	60. 8

	Thi s	Other Hospital-	Al l
	Facility	Based Facilities	Facilties
	%	% Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96. 0	87. 5 1. 10	84. 5 1. 14
Current Residents from In-County	83. 8	83. 6 1. 00	77. 5 1. 08
Admissions from In-County, Still Residing	43. 3	14. 5 2. 99	21. 5 2. 02
Admi ssi ons/Average Daily Census	41. 7	194. 5 0. 21	124. 3 0. 34
Discharges/Average Daily Census	41. 7	199. 6 0. 21	<b>126.</b> 1 0. 33
Discharges To Private Residence/Average Daily Census	9. 7	102. 6 0. 09	49. 9 0. 19
Residents Receiving Skilled Care	85. 1	91. 2 0. 93	83. 3 1. 02
Residents Aged 65 and Older	98. 6	91. 8 1. 07	87. 7 1. 12
Title 19 (Medicaid) Funded Residents	83. 8	66. 7 1. 26	69. 0 1. 21
Private Pay Funded Residents	16. 2	23. 3 0. 70	<b>22</b> . 6 0. 72
Developmentally Disabled Residents	0. 0	1.4 0.00	7. 6 0. 00
Mentally Ill Residents	32. 4	30. 6 1. 06	33. 3 0. 97
General Medical Service Residents	18. 9	19. 2 0. 99	18. 4 1. 03
Impaired ADL (Mean)*	40. 8	51. 6 0. 79	49. 4 0. 83
Psychological Problems	60. 8	52. 8 1. 15	50. 1 1. 21
Nursing Care Required (Mean)*	5. 4	7.8 0.69	7. 2 0. 76